

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
OIPE CLASSIFIER			
FORMALITY REVIEW	21	7533	11/3/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	9/2/6
2	11/16
3	1/16
4	2/24
5	3/16
6	4/16
7	5/16
8	6/16
9	7/16
10	8/16
11	9/16
12	10/16
13	11/16
14	12/16
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here